



## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

026096 7590 04/06/2004

**CARLSON, GASKEY & OLDS, P.C.  
400 WEST MAPLE ROAD  
SUITE 350  
BIRMINGHAM, MI 48009**

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Theresa M. Palmaiteer		(Depositor's name)
<i>Theresa M. Palmaiteer</i>		(Signature)
		6-10-04
		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/624,461	07/22/2003	Horst Bohm	60130-1849; 00MRA0071	5579

TITLE OF INVENTION: VEHICLE ROOF MODULE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/06/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
PAPE, JOSEPH	3612		296-210000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Carlson, Gaskey & Olds

2. \_\_\_\_\_

3. \_\_\_\_\_

### 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ArvinMeritor GmbH

Dietzenbach, Fed. Republic of Germany

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee

Advance Order - # of Copies \_\_\_\_\_

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Payment by credit card. Form PTO-2038 is attached.

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<i>[Signature]</i> 6-10-04						
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<p>06/16/2004 JBALINA2 00000065 10624461</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">01 FC:1501</td> <td style="width: 30%;">1330.00 OP</td> </tr> <tr> <td>02 FC:1504</td> <td>300.00 OP</td> </tr> </table>			01 FC:1501	1330.00 OP	02 FC:1504	300.00 OP
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